CHAPTER 204 SB 553 - FINAL VERSION

 $\begin{array}{ccc} 03/24/2016 & 1154s \\ 11May 2016 ... & 1745h \end{array}$

2016 SESSION

16-2745 01/10

SENATE BILL 553

AN ACT relative to implementation of the Medicaid managed care program.

SPONSORS: Sen. Forrester, Dist 2; Sen. Carson, Dist 14; Sen. Feltes, Dist 15; Sen. Little, Dist

8; Sen. Reagan, Dist 17; Sen. Sanborn, Dist 9; Rep. Kotowski, Merr. 24; Rep. Ladd, Graf. 4; Rep. D. Brown, Graf. 16; Rep. Wallner, Merr. 10; Rep. Rosenwald,

Hills. 30

COMMITTEE: Health and Human Services

AMENDED ANALYSIS

This bill establishes procedures for the implementation of phase 2 of the Medicaid managed care plan.

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Explanation: Matter added to current law appears in **bold italics**.

Matter removed from current law appears [in brackets and struckthrough.]

Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

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STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Sixteen

AN ACT relative to implementation of the Medicaid managed care program.

Be it Enacted by the Senate and House of Representatives in General Court convened:

- 204:1 Medicaid Managed Care Program; Implementation. Notwithstanding any other provision of law to the contrary, the remaining unimplemented phases of the Medicaid managed care program, established in RSA 126-A:5, XIX, specifically nursing services; services provided under the choices for independence waiver; and services provided under the developmental disability, acquired brain disorder and in-home support waivers issued by the Centers for Medicare and Medicaid Services (CMS) under 42 U.S.C. section 1915(c), shall not be implemented until after:
- I. The department of health and human services has prepared and adopted a comprehensive plan for the services to be incorporated into managed care.
- II. The department has obtained approval by CMS of any waivers and state plan amendments necessary for the incorporation of such services into managed care.
- III. The plan has been presented to the fiscal committee of the general court, the oversight committee on health and human services, established in RSA 126-A:13, and the county-state finance commission, established in RSA 28-B:1.
- IV. The department has presented a report by the department's actuary on the per member/per month cost of providing services within managed care under each plan to the general court. The report shall also identify all applicable rate cell information and include medical loss ratio information on managed care organization performance in the New Hampshire Medicaid care management program. The report shall be subject to the provisions of RSA 91-A.
- V. The governor and executive council have approved any contract or contract amendment for the implementation of such services into managed care.
 - 204:2 Development of Plan. The department of health and human services shall develop the plan for the incorporation of nursing and waiver services into managed care, as follows:
 - I. No later than 30 days after the effective date of this section, the department shall convene a working group consisting, at a minimum, of representatives of the following stakeholders: each managed care plan under contract with the state, the New Hampshire Association of Counties, the New Hampshire Health Care Association, Community Support Network, Inc., Granite State Independent Living, the Brain Injury Association of New Hampshire, Granite State Home Health Association, a member of the house of representatives appointed by the speaker of the house of representatives, a member of the senate appointed by the senate president, an independent case management organization industry representative, a member of the governor's commission on

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managed care designated by the commission, and a member of the medical care advisory committee designated by the committee.

II. The working group shall be convened by the commissioner of health and human services and shall be subject to RSA 91-A. The department, in consultation with the working group, shall prepare a plan for the implementation of nursing and waiver services into managed care. Each plan shall include, at a minimum, a detailed description of the following: eligibility and enrollment, covered services, transition planning, prior authorization, transportation, pharmacy, case management, network adequacy, credentialing, quality metrics and outcome measurements, patient safety, utilization management, finance and reimbursement, rates and payment, grievance and appeals, and office of ombudsman. Each plan shall also address how the incorporation of the services into managed care shall achieve the legislative intent of providing value, quality, efficiency, innovation, and savings.

III. The plans for implementation of nursing and home care services provided under the choices for independence waiver into managed care shall be prepared prior to the plan for any other waiver services. The preparation of any plan by the working group for the incorporation of services provided under the developmental disability, acquired brain syndrome, and in-home supports waivers shall commence only after the completion of implementation of nursing and home care services under the choices for independence waiver into managed care.

204:3 Hearing; Public Comment. Each plan prepared by the department under section 2 of this act shall be subject to notice and public comment for 60 days and a public hearing.

204:4 Reports.

- I. The department of health and human services shall present an update on the status of the plan preparation each month to the fiscal committee of the general court and the oversight committee on health and human services until the plan has been implemented. The department's updates shall also include managed care organization and department readiness for implementation.
- II. No later than August 1, 2016, the department shall submit to the speaker of the house of representatives, the president of the senate, and the county-state finance commission, all proposed changes to state law the department believes may be necessary for the incorporation of nursing and waiver services into managed care.
- 31 204:5 Effective Date. This act shall take effect upon its passage.
- 32 Approved: June 6, 2016
- 33 Effective Date: June 6, 2016